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DATE: March 9, 2006
PTO IDENTIFIER: Application Number 10/567956 Patent Number Inventor: Wilhelm Többen et al.
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FROM: CONNOLLY BOVE LODGE & HUTZ LLP
Ashley I. Pezzner
PHONE: (302) 658-9141
Attorney Dkt. #: 14069-00001-US
PAGES (Including Cover Sheet):
CONTENTS: Fee Transmittal (1 page) Transmittal Of Combined Declaration And Power Of Attorney (1 page) Combined Declaration And Power Of Attorney (2 pages) Charge \$130.00 to deposit account 03-2775
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Attorney Docket No.: 14069-00001-US Application No. (If known): 10/567956 Certificate of Transmission under 37 CFR 1.8 MS PCT I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office. March 9, 2006 Date J. Lynn Ferry Typed or printed name of person signing Certificate Telephone Number Registration Number, if applicable Each paper must have its own certificate of transmission, or this certificate must Note: identify each submitted paper. Fee Transmittal (1 page) Transmittal Of Combined Declaration And Power Of Attorney (1 page) Combined Declaration And Power Of Attorney (2 pages) Charge \$130.00 to deposit account 03-2775

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Docket No.: 14069-00001-US

(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Wilhelm Többen et al.

Application No.: 10/567956

Group Art Unit: N/A

Filed: February 10, 2006

Examiner: Not Yet Assigned

For: SMOKE-PERMEABLE, DRAWN, SEAMLESS TUBULAR CASING AND USE THEREOF AS

CASING FOR FOODSTUFFS

TRANSMITTAL OF COMBINED DECLARATION AND POWER OF ATTORNEY

MS PCT Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Applicant transmits herewith the executed Combined Declaration And Power Of Attorney.

Please charge our Deposit Account No. 03-2775 in the amount of \$130.00 covering the required fees. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 03-2775, under Order No. 14069-00001-US.

Dated: March 9, 2006

130.00 DA

03/13/2006 WABDELR1 00000053 032775

Respectfully submitted.

Ashley I. Pezzner

Registration No.: 35,646

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PTO/SB/17 (12-04v2)
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FEE TRANSMITTAL FOR FY 2005 Application Number Filing Date First Named Inventor First Named Inventor First Named Inventor Wilhelm Többen Examiner Name Not Yet Assigned Art Unit NA TOTAL AMOUNT OF PAYMENT (\$) 130.00 Attorney Docket No. 14069-00001-US METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please Identify): Check Credit Card Money Order None Other (please Identify): Connolly Bove Lodge & Hutz LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below Tee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES FILING FEES SEARCH FEES SMAll Entity Application Type Fee (\$) Fee (
FEE TRANSMITTAL For FY 2005 Applicant claims small entity status. See 37 CFR 1.27 Art Unit N/A
For FY 2005 Examiner Name Inventor Willnest 1 Oxford September 1 Oxfo
Applicant dalms small entity startus. See \$7 CFR 1.27 Art Unit N/A TOTAL AMOUNT OF PAYMENT (\$) 130.00 Attorney Docket No. 14069-00001-US METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number: 03-2775 Deposit Account Name: Connolly Bove Lodge & Hutz LLP For the above-identified daposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) Indicated below, except for the filing fac X Charge any additional fee(s) or underpayment of Charge fee(s) Indicated below, except for the filing face X Charge any additional fee(s) or underpayment of Charge fee(s) Indicated below, except for the filing face X Credit any overpayments FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Application Type Fee (\$) F
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Application Type
Utility 300 150 500 250 200 100
Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300
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Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)
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Signature Registration No. 35,646 Telephone (302) 658-9141
Name (Print/Typo) Ashley I. Pezzner Date March 9, 2006